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CONFIRMATION NO. 3044

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| SERIAL NUMBER 10/801,283 | FILING OR 371(c) DATE 03/16/2004 RULE | CLASS 600 | GROUP ART UNIT 3739 | ATTORNEY DOCKET NO. P29-005 |
| APPLICANTS Gregory Piskun, Morganville, NJ; | | | | |
| ** CONTINUING DATA ***** | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 06/01/2004 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>[Signature]</i> <i>MK</i> Examiner's Signature Initials | | STATE OR COUNTRY NJ | SHEETS DRAWING 6 | TOTAL CLAIMS 43 |
| | | | INDEPENDENT CLAIMS 4 | |
| ADDRESS R. Neil Sudol 714 Colorado Avenue Bridgeport, CT06605-1601 | | | | |
| TITLE Hemorrhoids treatment method and associated instrument assembly including anoscope and cofunctioning tissue occlusion device | | | | |
| FILING FEE RECEIVED 760 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |